

TO: ALL SCHOOL FOOD SERVICE DIRECTORS

**FORM TO DECLINE FRESH FRUITS AND VEGETABLE PROGRAM
For School Year 2009-2010**

If you decline to participate in the FFV Program for SY2009-2010 and choose to receive an equal amount in extra PAL funds, please complete this form and **FAX** to the Commodity Office **by close of business Friday, April 24, 2009.**

FAX NUMBER 501-371-1410 (Type or Print)

School/Agency
Name _____ RA# _____

Mailing address _____

City _____ ZIP _____

Telephone # _____ FAX # _____

Superintendent's Name _____
(please print)

Superintendent's Signature _____

Foodservice Director's Name _____
(please print)

Foodservice Director's Signature _____

E-Mail Address _____